FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Goepel Patrick					2. Issuer Name and Ticker or Trading Symbol ASURE SOFTWARE INC [ ASUR ]								(Ch	Relationship of Reporting Person(s) to Issue (Check all applicable)     X Director 10% Owner					
(Last)	(Fi	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/31/2015								below	r (give title ) hief Execu	ıtive (	Other (s below) Officer	specify		
(Street) SUDBU			)1776 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	5. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Deriv  1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					tion	ion 2A. Deemed Execution Date,			3. Transact	4. Secu	. Securities Acquired ( isposed Of (D) (Instr. :				unt of ies :ially		: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amoun	t (A	) or )	Price	Reporte Transa	ed	(		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Asure Software, Inc. Common Stock (\$0.01 par value)															29:	293,832		D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dee Execution if any (Month/	on Date,	4. Transactio Code (Insti 8)		on of		6. Date Exercisable ar Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y D (1	O. Dwnership Form: Direct (D) or Indirect I) (Instr.	Beneficial Ownership
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	or	ount mber ares					
Employee Stock Option (Right to Buy)	\$2.33								(1)		(2)	Commo Stock (\$0.01 par value)		5,000		\$225,000		D	
Employee Stock Option (Right to Buy)	\$5.76	03/31/2015			A		60,000		(3)	03.	/31/2020	Commo Stock (\$0.01 par value)		,000	\$0	285,000		D	

- 1. For 52,500 options: Such options shall vest over a 4 year period following issuance such that 25% of the shares shall vest on 9/15/2010 and an additional 6.25% shall vest each three (3) months thereafter. For 172,500 options: Such options will vest as follows: 1/14th (or 12,321 shares) of the total shares will vest each calendar quarter beginning September 30, 2011 through September 30, 2014, and the remaining 12,327 shares will vest on December 31, 2014.
- 2. For 52,500 Options: 9/21/2019 For 172,500 Options: 12/31/2019
- 3. For 30,000 options: Such options shall vest over a 3 year period following issuance such that 1/3 of the shares shall vest on 3/31/2016 and an additional 8.33% shall vest each three (3) months thereafter. For 30,000 options: Such options will vest at 12/31/15 based on achievement of performance criteria as approved by the board of directors.

/s/ Patrick Goepel 04/02/2015

\*\* Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.